MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/559573

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 ** AMENDMENT		CLAIN	10	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	<u> </u>		IND.	DEP.	IND.	DEP.	IND.	DEP.
1 2	1-4	1			<u> </u>		4	51						
3		1-"	<u> </u>		<u> </u>		∦.	52 53						
4]	54						
5		<u> </u>	<u> </u>				<u>]</u> .	55						
7	 	<i>-</i> -			1	· · ·	1	<u>56</u> 57						
8	_:/				(1	58	ļ					
9		/			7		1	59						
10 11		1				:	1	60						
12	 	1			7		1	61					: 	
13		8				.,	1	63						
14	ļ	8,						64						
15 16	 	:8	ļ					65						
17	1							66						
18								68						
19	1.1							69		,				
20 21	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	 				·		70						
22		1						71 72						
23		2						73						
24		3	·					74						
25 26		3						75]		
27		3						76 77						
28		. 2						78						
29		2						79						1
30 31		3						80						
32								81 82	·					
33								83						
34								84						
35 36								85						
37								86 87						
38							· }	88		 }		 }		
39							. <u> </u>	89						
40	 						•	90						
42				 {}			-	91					:	
43								93						
44 45							[94						
46							1	95 96						
47							-	96						
48							ŀ	98						
49 50								99						
TOTAL	10						-	100 TOTAL						
IND.		- ₽		₽		\Box	1	IND.		₹}	1	\bigcirc		\bigcirc
TOTAL DEP.	56			(⟨ □		TOTAL DEP.						
TOTAL CLAIMS	68	2.2.2.2.2.11		4				TOTAL CLAIMS						
PTO - 1366	(REV. 11/04)							U P	.S. DEPART atent and Tr	MENT of CO	MMERCE		